

STORM SEAB

CALIFORNIA HAZARDOL WASTE MANIFEST

State Department of Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
740 P Street, Sacramento, CA 95814

See reverse side for Instructions.
Please type or print clearly. Press Hard.

① Manifest Number **227-02587U**

GENERATOR (Generator Must Complete)

③ Designated TSD Facility (Authorized to operate under an approved state program or federal program)

② Name Douglas Aircraft Co.	EPA NO. 0123456789012345
Address 1900 Alameda Street	City, State, Zip Los Angeles, CA 90011
Phone No. 555-1234	U.S. DOT HAZARD CLASS UN1100
City, State, Zip Torrance, CA 90509	UN/NA ID NO. 123456789012345
WEIGHT OR VOLUME 1000 Cubic Yards	
CONTAINERS NUMBER: 1000 Boxes	
TYPE: DRUMS <input checked="" type="checkbox"/> BAGS <input type="checkbox"/> CARTONS <input type="checkbox"/> DUMP TRUCK <input type="checkbox"/> OTHER	

⑥ WASTE CATEGORY **70** ⑦ EX. HAZ. WASTE PERMIT NO. **N/A** ⑧ GENERATING PROCESS **Machining Process**

LIST COMPONENTS:	RANGE LOWER	RANGE UPPER	CONC. UPPER	CONC. LOWER	UNITS	UNITS
A. Alum	10	100	%	0%	ppm.	ppm.
B. Water	60	60	%	0%	ppm.	ppm.
C. 			%	0%	ppm.	ppm.
D. 			%	0%	ppm.	ppm.

⑨ WASTE PROPERTIES: pH 7.0	<input type="checkbox"/> Flammable	<input type="checkbox"/> Corrosive/Irritant	<input type="checkbox"/> Reactive	<input type="checkbox"/> Sensitizer	<input type="checkbox"/> Carcinogen/Mutagen
⑩ PHYSICAL STATE: Toxic	<input type="checkbox"/> Sludge	<input checked="" type="checkbox"/> Slurry	<input type="checkbox"/> Gas	<input type="checkbox"/> Other	<input type="checkbox"/> Other
⑪ SOLID	<input type="checkbox"/> Liquid	<input checked="" type="checkbox"/> Slurry	<input type="checkbox"/> Goggles	<input type="checkbox"/> Respirator	<input type="checkbox"/> Other
⑫ GLOVES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

⑬ SPECIAL HANDLING INSTRUCTIONS: **(HAULER MUST COMPLETE) 23488** TRUCK NO. **9** TLR. NO. **1588** ⑭ NAME **OIL PROCESS CO.** ⑮ PICK-UP DATE **3-01-83** ⑯ TIME **11:15 AM** PM

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

⑰ NAME **CAD OIL PROCESS CO.** PHONE NO. **(213) 585-5063** ⑯ SIGNATURE OF AUTHORIZED AGENT AND TITLE **Manager** ⑰ DATE SHIPPED **3-01-83**

⑲ CITY, STATE, ZIP **Los Angeles, California 90058** ⑳ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT: **IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:**

⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0** ⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0** ⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0**

⑳ EPA NO. **0123456789012345** ⑳ EPA NO. **0123456789012345** ⑳ EPA NO. **0123456789012345** ⑳ EPA NO. **0123456789012345**

⑳ PHONE NO. **0123456789012345** ⑳ PHONE NO. **0123456789012345** ⑳ PHONE NO. **0123456789012345** ⑳ PHONE NO. **0123456789012345**

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⑳ TSD FACILITY (FACILITY OPERATOR MUST COMPLETE) **BL** ⑳ HANDLING OR DISPOSAL METHOD: **Landfill** Landfill Surface Impoundment Injection Well Land Treatment Treatment (Specify) Recovery or Reuse Storage/Transfer

⑳ IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY: **BL** ⑳ DATE ACCEPTED **3/3/83** ⑳ DATE GENERATED **TO GENERATOR**

⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0** ⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0** ⑳ NAME **BL** QUANTITY (If Measured) **1588** STATE FEE (If Any) **0**

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INSTRUCTIONS FOR COMPLETING MANIFEST

for
the
State

Type clearly, legible or incomplete manifests will be returned to you by the State.

GENERAL INFORMATION

- ITEM ① Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER Item No. 1 below.)
 ITEM ② Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.
 ITEM ⑤ Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in item 5.

- ITEM ⑥ Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. (Example: if you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid"; rather than "Addition" or "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in item 6.)

1. Acid sludge	31. Fly ash	46. Oil, A.G.	61. Scrubber solution
2. Acid solution	32. Glaze sludge	47. Oil sludge	62. Soap
3. Adhesive	33. Glaze sludge	48. Oil and water	63. Solvent, chlorinated
4. Alkaline sludge	34. Glue	49. Paint sludge	64. Solvent, hydrocarbon
5. Alkaline solution	35. Hair pulp	50. Pesticides	65. Solvent, oxygenated
6. Alkali sludge	36. Heavy metal solution	51. Pesticide rinses	66. Solvent, mixed
7. API separator sludge	37. Heavy metal sludge	52. Pesticide rinses	67. Spill cleanup residue
8. Asbestos solids	38. Ink and solvent	53. Phenolic waste	68. Striper solution
9. Asbestos sludge	39. Ink sludge	54. Photo-processing waste	69. Sulfide sludge
10. Asbestos sludge	40. Ink waste water	55. Plating sludge	70. Sump or lagoon sediment
11. Ashes	41. Laboratory chemicals	56. Plating solution, acidic	71. Tank bottom sediment
12. ASD filter cake	42. Lime sludge	57. Plating solution, alkaline	72. Tanning sludge
13. Baghouse waste	43. Machine tool coolant	58. Polychlorinated biphenyls	73. Teriarthy lead sludge
14. Bleach water	44. Machining waste	59. Resin waste	74. Transformers, PCB
15. Blasting sand	45. Metal dust	60. Scrubber sludge	75. Waste water/treatment sludge

If waste not listed above, specify in item 6 on manifest.

ITEM ⑦ If the waste is extremely hazardous, provide the State extremely hazardous permit number, or operation which generated the waste (Examples: aircraft cleaning insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM ⑨ INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Example: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous material.

ITEM ⑩ Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive), check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in item 11.

ITEM ⑪ Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted. (Example: Sulfide solution will generate toxic gas if mixed with acids).

ITEM ⑫ Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing item 13 shall be knowledgeable about the chemical and physical properties of the waste, and shall be authorized by the management of the generating establishment to sign the manifest. If the waste is not handled by the generator, the generator may sign item 13.

TRANSPORTER:

ITEM ⑬ Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., sequential or biological). For example, if your registration number is 899, the number of your one thousand load would be 899-01000. The complete nine digit manifest number shall be unique for any five year period. (Example: If you use manifest number 899-01000 on May 31, 1981, it shall not be used on a manifest again before June 1, 1986).

ITEM ⑭ Enter company name, EPA I.D. number, address and telephone number.

ITEM ⑮ Indicate the date and exact time the waste was removed from the generator's facility.

ITEM ⑯ Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 177.817(e).

TSD FACILITY OPERATOR:

ITEM ⑰ Provide the TSD facility name and EPA I.D. number.

ITEM ⑱ If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed) indicate the quantity.

ITEM ⑲ Enter company name, EPA I.D. number, address and telephone number.

ITEM ⑳ Indicate the date and exact time the waste was removed from the facility.

ITEM ㉑ Sign the manifest upon receipt of the shipment and indicate the date signed.

ITEM ㉒ Write in any discrepancies noted between the manifest prior to eventual shipment to another facility for treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you, as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator or transporter and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifest.

ITEM ㉓ Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. If the waste is treated prior to or instead of land disposal write in the treatment method (Examples: neutralization, incineration, oxidation).

ITEM ㉔ If the waste is held at the TSD facility on a monthly basis, or as otherwise required, if wastes are received from transfer facilities, the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it. (Example: Copy No. 1 to TSD facility; Copy No. 2 to Generator; Copy No. 3 to Transporter; Copy No. 4 to Disposal Facility).

ITEM ㉕ Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facility operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSDF keeps - (Send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator; Copy No. 4: To Disposal Facility.

TO INSURE LEGIBLE COPIES USE ONLY BLACK CARBON. INSERTS OR BLACK PRINT. CARBONLESS TRANSFER PAPER.
 Because a signed
 copy must be present for each manifest to be valid.